2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S21211 1. Entity Name LINDBERG PROPERTIES, INC.						Apr 18, 2002 8:00 am Secretary of State 04-18-2002 90385 002 ***150.00			
Principal Place of Business 741 BAYSHORE DR. FT. LAUDERDALE FL 33304 Mailing Address 741 BAYSHORE DR. FT. LAUDERDALE FL 33304 FT. LAUDERDALE FL 3330				4				DIA DIDIA DIDIA KADRI	
Principal Place of Business Address Mailing Address									
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE			
City & Star	te	City & State			4.	4. FEI Number 65-0234506 Applied For Not Applicable			
Zip Country		Zip Country		try	5.	Certificate of Status Desired	\$8.75 Fee Requ	Additional	
	6. Name and Address of Current F	l		[7. 1	Name and Address of New Regi			
				Name					
SILVERMAN, MURRAY C 1919 NE 45TH ST. STE 215				Street Address (P.O. Box Number is Not Acceptable)					
FORT LAUDERDALE FL 33308									
	•			City			FL Zip C	Code	
	named entity submits this statement for								
Tax filing (See crite	oration is eligible to satisfy its Intangible requirement and elects to do so. ria on back)	FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of Sta			f State	ate Added to Fees			
11.	OFFICERS AND (12.		AD	DITIONS/CHANGES TO OFFICE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LINDBERG, KARL HENRIK GRASUDDSVGEN 21 SODERHAMN, SWEDEN	☐ Delete					∐ Chang	ge [] Addition 	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD LINDBERG, JAN HAKAN NORRALAGATAN SODERHAMN, SWEDEN	☐ Delete		ı			☐ Chang	ge 🔲 Addition	
TITLE	VTD LINDBERG, KARL KENNART REPSLAGARGATAN 18 SODERHAMN, SWEDEN	Delete `	4	·	ాకా అలగు	ಪ್ರವೀತ ಕರ್ನಿಕೆ ಕೆಗಳು ಕೆಗೆ ಬಿಳಿಗೆ	- Chang	ge- 🕶 🖪 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete					☐ Chang	ge 🗌 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete					☐ Chang	ge 🔲 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete					☐ Chang	ge 🔲 Addition	
indicated of the cor	certify that the information supplied with on this report or supplemental report is poration or the receiver or trustee empo- or on an attachment with an address, w	true and accurate and that movered to execute this report a	ıy signat	ure shall have	the same	legal effect as if made under oath	i; that I am an offic	cer or director	

SIGNATURE: K. H. L. C. L. SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/8/02

(954) 491-3292 Daytime Phone #